U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION FOR INSURANCE COMPANY USE A1. Building Owner's Name Policy Number: JUANITA MONAHAN A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. Company NAIC Number: **708 TIMBALIER STREET** City WAVELAND ZIP Code 39576 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS 10 & 11, BLOCK 900, UNIT 9, SHORELINE PARK SUBD, TAX PARCEL NUMBER 138K-2-34-020.000 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. N 30°18'20.81" Long. W 89°23'27.65" Horizontal Datum: NAD 1927 **▼** NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number _____5 A8. For a building with a crawlspace or enclosure(s): A9. For a building with an attached garage: N/A a) Square footage of crawlspace or enclosure(s) N/A _ sq ft a) Square footage of attached garage sq ft b) No. of permanent flood openings in the crawlspace or b) Number of permanent flood openings in the attached garage N/A enclosure(s) within 1.0 foot above adjacent grade within 1.0 foot above adjacent grade N/A N/A c) Total net area of flood openings in A8.b N/A sa in c) Total net area of flood openings in A9.b _ sa in d) Engineered flood openings? d) Engineered flood openings? ☐ Yes X No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION NFIP Community Name & Community Number CITY OF WAVELAND 285262 B3. S MS State HANCOCK COUNTY B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone Revised Date AO, use base flood depth) 28045C0342 10/16/2009 10/16/2009 AE 18' B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile ▼ FIRM ☐ Community Determined ☐ Other/Source: B11. Indicate elevation datum used for BFE in Item B9: □ NGVD 1929 X NAVD 1988 ☐ Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date: _ _ CBRS ☐ OPA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. NGS Q 364 BH3287 Benchmark Utilized: NAVD 88 Vertical Datum: . Indicate elevation datum used for the elevations in items a) through h) below. 🗌 NGVD 1929 🔀 NAVD 1988 🗎 Other/Source: _ Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. 21 3 a) Top of bottom floor (including basement, crawlspace, or enclosure floor) x feet ☐ meters N A b) Top of the next higher floor ☐ feet ☐ meters c) Bottom of the lowest horizontal structural member (V Zones only) N A ☐ feet ☐ meters N A d) Attached garage (top of slab) ☐ feet ☐ meters 20 7 e) Lowest elevation of machinery or equipment servicing the building x feet meters (Describe type of equipment and location in Comments) 9 5 f) Lowest adjacent (finished) grade next to building (LAG) | feet ☐ meters g) Highest adjacent (finished) grade next to building (HAG) 9 6 x feet ☐ meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including 9 6 × feet structural support SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a ■ Check here if attachments. licensed land surveyor? X Yes ☐ No License Number PATRICK M. MARTINO 02838 P.LSS-2838 Company Name **PROFESSIONAL LAND SURVEYOR** PATRÍCK M MARTINO, PLS INC. ZIP Code 13061 HIGHWAY 67, SUITE B BILOXI MS 39532 Signature Telephone 05/03/2013 (228) 396-2283

IMPORTANT: In these spaces, copy the cor	responding information from Se	ction A.		FO	R INSURANCI	E COMPANY USE
Building Street Address (including Apt., Unit, 708 TIMBALIER STREET	Suite, and/or Bldg. No.) or P.O.	Route and Box No.		Pol	icy Number:	and the second
City	State	ZIP Code		Co	mpany NAIC Nu	mber:
WAVELAND	MS	39576				4
	SURVEYOR, ENGINEER, OF					
Copy both sides of this Elevation Certificate Comments LOWEST MACHINERY SHOWN I					ner.	
CONTACT CITY OF WAVELAND	N SECTION C-2-E WAS THE AIR	R CONDITIONER U FURTHER HEIGH	NIT PEDESTA T REQUIREM	AL. ENTS.		
Signature A A		Date 05/03	/2013	10.11.	JOB#	P13385
SECTION E - BUILDING ELEVATION	N INFORMATION (SURVE)	NOT REQUIRE) FOR ZON	NE AO AN	D ZONE A	(WITHOUT BFE)
For Zones AO and A (without BFE), complete I For Items E1–E4, use natural grade, if availat E1. Provide elevation information for the follo grade (HAG) and the lowest adjacent grad	ole. Check the measurement use wing and check the appropriate	ed. In Puerto Rico o	nly, enter met	ters.		
a) Top of bottom floor (including basemen			☐ feet [meters	☐ above or	☐ below the HAG.
b) Top of bottom floor (including basemen			☐ feet [below the LAG.
2. For Building Diagrams 6–9 with permaner	nt flood openings provided in Sec	ction A Items 8 and	or 9 (see pa	iges 8–9 of	Instructions),	
the next higher floor (elevation C2.b in the	e diagrams) of the building is		☐ feet [below the HAG.
3. Attached garage (top of slab) is	State of the state		☐ feet [below the HAG.
4. Top of platform of machinery and/or equip			☐ feet ☐			below the HAG.
 Zone AO only: If no flood depth number is ordinance? ☐ Yes ☐ No ☐ Unknow 	n. The local official must certify	this information in	accordance of Section G.	with the cor	nmunity's floc	odplain management
	PROPERTY OWNER (OR OV					
he property owner or owner's authorized repr one AO must sign here. The statements in S	resentative who completes Sect	ons A, B, and E for	Zone A (with	out a FEMA-	issued or con	nmunity-issued BFE) o
roperty Owner or Owner's Authorized Represe		o the best of my kn	owiedge.			
ddress		Oit.		01-1-	710.0	
		City		State	ZIP C	ode
gnature		Date		Telepho	ne	
omments					_	
					☐ Check	here if attachments.
	SECTION G - COMMUNITY	INFORMATION	(OPTIONAL	L)		
ne local official who is authorized by law or ord of this Elevation Certificate. Complete the ap	linance to administer the commu plicable item(s) and sign below. (nity's floodplain mar Check the measuren	nagement ordi nent used in I	inance can d tems G8–G2	complete Sect LO. In Puerto I	tions A, B, C (or E), and
 The information in Section C was take who is authorized by law to certify election. A community official completed Section. The following information (Items G4- 	evation information. (Indicate the on E for a building located in Zor	ne source and date ne A (without a FEM	of the elevat A-issued or c	ion data in ommunity-is	the Commen	ts area below.)
4. Permit Number	G5. Date Permit Issued	G6.	Date Certifica	ate Of Comp	oliance/Occup	pancy Issued
7. This permit has been issued for: \(\sum N\) 8. Elevation of as-built lowest floor (includin 9. BFE or (in Zone AO) depth of flooding at to 10. Community's design flood elevation:	g basement) of the building: _	tial Improvement	☐ feet ☐	meters	Datum	
ocal Official's Name		Title				-
ommunity Name		Telephone				
gnature	- Andrews Regulation - Andrews Regulation	Date				
omments			Taxon aller and a second			F
					☐ Check	here if attachments.

IMPORTANT: In these spaces, copy the cor	responding information from Se	ction A.		FO	R INSURANCE COMPANY USE
Building Street Address (including Apt., Unit,				Policy Number:	
708 TIMBALIER STREET City	State	ZIP Code		Co	mpany NAIC Number:
WAVELAND	MS	39576			mpony maio nomber.
	SURVEYOR, ENGINEER, OR			•	
Copy both sides of this Elevation Certificate					ner.
Comments LOWEST MACHINERY SHOWN I					
Signature /		Date 05/03	3/2013		JOB# P13385
SECTION E – BUILDING ELEVATION	ON INFORMATION (SURVEY			NE AO AN	D ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete I For Items E1–E4, use natural grade, if availab E1. Provide elevation information for the follo grade (HAG) and the lowest adjacent grad	tems E1–E5. If the Certificate is ble. Check the measurement use wing and check the appropriate le (LAG).	intended to suppo ed. In Puerto Rico o boxes to show whe	ort a LOMA or only, enter met other the eleva	LOMR-F red ters. ation is abo	quest, complete Sections A, B, ar
 a) Top of bottom floor (including basement b) Top of bottom floor (including basement 			☐ feet ☐		□ above or □ below the HAG □ above or □ below the LAG
E2. For Building Diagrams 6–9 with permaner					
the next higher floor (elevation C2.b in the			☐ feet [☐ above or ☐ below the HAG
E3. Attached garage (top of slab) is			☐ feet ☐	meters	☐ above or ☐ below the HAG
E4. Top of platform of machinery and/or equip			s s ssessman or		☐ above or ☐ below the HAG
E5. Zone AO only: If no flood depth number is ordinance? ☐ Yes ☐ No ☐ Unknow	available, is the top of the botton. The local official must certify			with the co	mmunity's floodplain manageme
SECTION F - F	PROPERTY OWNER (OR OW	NER'S REPRES	SENTATIVE)	CERTIFIC	CATION
The property owner or owner's authorized repr Zone AO must sign here. The statements in S				out a FEMA	issued or community-issued BFI
Property Owner or Owner's Authorized Represe		o the boot of my in	iomougo.		
Address		City		State	ZIP Code
Signature		Date		Telepho	one
Comments				Тоторите	
				au incina concept	☐ Check here if attachmen
	SECTION G - COMMUNITY				
The local official who is authorized by law or ord G of this Elevation Certificate. Complete the ap					
 G1. The information in Section C was take who is authorized by law to certify elements. G2. A community official completed Sections. The following information (Items G4- 	evation information. (Indicate thon E for a building located in Zor	ne source and date ne A (without a FEN	of the elevat MA-issued or c	tion data in community-i	the Comments area below.)
G4. Permit Number	G5. Date Permit Issued	G6.	Date Certifica	ate Of Com	pliance/Occupancy Issued
G7. This permit has been issued for: \(\sum \) NG8. Elevation of as-built lowest floor (includin G9. BFE or (in Zone AO) depth of flooding at t G10. Community's design flood elevation:	g basement) of the building: _	tial Improvement	☐ feet ☐] meters] meters] meters	Datum Datum Datum
ocal Official's Name		Title		No.	
Community Name		Telephone			
Signature		Date			
Comments					
					☐ Check here if attachmen
					—

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the	corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., L 708 TIMBALIER STREET	nit, Suite, and/or Bldg. No.) or PO. Route and Box No.	Policy Number:
City WAVELAND	State ZIP Code MS 39576	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



FRONT VIEW OF BUILDING. PICTURE TAKEN 5/03/2013

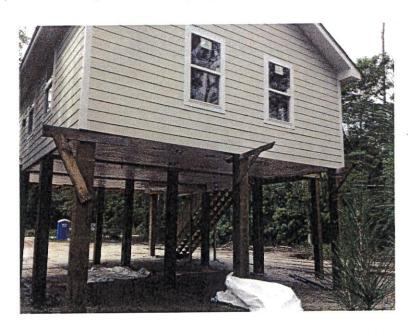


REAR VIEW OF BUILDING. PICTURE TAKEN 5/03/2013

Continuation Page

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., L 708 TIMBALIER STREET	Policy Number:	
City WAVELAND	State ZIP Code MS 39576	Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



RIGHT SIDE VIEW OF BUILDING. PICTURE TAKEN 5/03/2013



LEFT SIDE VIEW OF BUILDING. PICTURE TAKEN 5/03/2013

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the	ne corresponding information from Section A.	FOR INSURANCE COMPANY USE
	, Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number:
City WAVELAND	State ZIP Code 39576	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



FRONT VIEW OF BUILDING. PICTURE TAKEN 5/03/2013



REAR VIEW OF BUILDING. PICTURE TAKEN 5/03/2013

Continuation Page

IMPORTANT: In these spaces, copy th	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., 708 TIMBALIER STREET	Unit, Suite, and/or Bldg, No.) or PO. Route and Box No.	Policy Number:
City WAVELAND	State ZIP Code MS 39576	Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



RIGHT SIDE VIEW OF BUILDING. PICTURE TAKEN 5/03/2013



LEFT SIDE VIEW OF BUILDING. PICTURE TAKEN 5/03/2013

U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

OMB No. 1660-0008

FEDERAL EMERGENCY MANAGEMENT AGENCY Expiration Date: July 31, 2015 IMPORTANT: Follow the instructions on pages 1-9. National Flood Insurance Program FOR INSURANCE COMPANY USE SECTION A - PROPERTY INFORMATION Policy Number: A1. Building Owner's Name **JUANITA MONAHAN** Company NAIC Number: A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. **708 TIMBALIER STREET** 7IP Code City WAVELAND 39576 MS Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) A3. LOTS 10 & 11, BLOCK 900, UNIT 9, SHORELINE PARK SUBD, TAX PARCEL NUMBER 138K-2-34-020.000 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. N 30°18'20.81" Long. W 89°23'27.65" **⋈** NAD 1983 Horizontal Datum: NAD 1927 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. 5 A7. Building Diagram Number ___ A9. For a building with an attached garage: A8. For a building with a crawlspace or enclosure(s): N/A N/A _ sa ft _sqft a) Square footage of attached garage a) Square footage of crawlspace or enclosure(s) b) No. of permanent flood openings in the crawlspace or b) Number of permanent flood openings in the attached garage N/A enclosure(s) within 1.0 foot above adjacent grade within 1.0 foot above adjacent grade N/A N/A sq in c) Total net area of flood openings in A9.b sq in c) Total net area of flood openings in A8.b d) Engineered flood openings? ☐ Yes d) Engineered flood openings? ☐ Yes SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. State NFIP Community Name & Community Number CITY OF WAVELAND 285262 B2. County Name
HANCOCK COUNTY B9. Base Flood Elevation(s) (Zone B8. Flood Zone(s) B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date AO, use base flood depth) 18' 10/16/2009 AE 28045C0342 D 10/16/2009 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ Other/Source: ▼ FIRM ☐ Community Determined X NAVD 1988 ☐ Other/Source: B11. Indicate elevation datum used for BFE in Item B9: □ NGVD 1929 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? _ CBRS ☐ OPA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Finished Construction ■ Building Under Construction* ☐ Construction Drawings* Building elevations are based on: *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. NGS Q 364 BH3287 **NAVD 88** Vertical Datum: -Benchmark Utilized: . Indicate elevation datum used for the elevations in items a) through h) below. $\ \square$ NGVD 1929 $\ \square$ NAVD 1988 $\ \square$ Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. 21 3 x feet □ meters a) Top of bottom floor (including basement, crawlspace, or enclosure floor) NA ☐ meters □ feet b) Top of the next higher floor N A ☐ feet ☐ meters c) Bottom of the lowest horizontal structural member (V Zones only) N A ☐ feet ☐ meters d) Attached garage (top of slab) 20 7 e) Lowest elevation of machinery or equipment servicing the building × feet ☐ meters (Describe type of equipment and location in Comments) 9 5 x feet ☐ meters f) Lowest adjacent (finished) grade next to building (LAG) 9 6 g) Highest adjacent (finished) grade next to building (HAG) x feet □ meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including 9 6 × feet meters structural support SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Were latitude and longitude in Section A provided by a Check here if comments are provided on back of form. X Yes □No ■ Check here if attachments. licensed land surveyor? License Numbe 02838 S 7838 PATRICK M. MARTINO Company Name PATRICK M MARTINO, PLS INC. PROFESSIONAL LAND SURVEYOR

Signature

13061 HIGHWAY 67, SUITE B

Telephone

(228) 396-2283

BILOXI

05/03/2013

39532

IMPORTANT: In these spaces, copy the c	orresponding information from Sect	ion A.		F	OR INSURANCE	E COMPANY USE
Building Street Address (including Apt., Ur					licy Number:	C COMITAIN TOSE
708 TIMBALIER STREET City	Chat-	710.0-4-		1.5	d it	
WAVELAND	State MS	ZIP Code 39576		Co	mpany NAIC Nu	moer:
	– SURVEYOR, ENGINEER, OR A					
Copy both sides of this Elevation Certificat					ner.	
Comments LOWEST MACHINERY SHOW! CONTACT CITY OF WAVELAN	N IN SECTION C-2-E WAS THE AIR O D BUILDING OFFICIALS FOR ANY F	CONDITIONER UN URTHER HEIGHT	NIT PEDEST REQUIRE	TAL. MENTS.		
Signature That the M		Date 05/03 /	2013		JOB#	P13385
SECTION E – BUILDING ELEVAT	ION INFORMATION (SURVEY I	NOT REQUIRED) FOR ZO	NE AO AN	D ZONE A	(WITHOUT BFE)
For Zones AO and A (without BFE), complet For Items E1–E4, use natural grade, if avail E1. Provide elevation information for the fo grade (HAG) and the lowest adjacent gr a) Top of bottom floor (including basem b) Top of bottom floor (including basem E2. For Building Diagrams 6–9 with perman	able. Check the measurement used. Ilowing and check the appropriate boade (LAG). ent, crawlspace, or enclosure) is _ ent, crawlspace, or enclosure) is _	In Puerto Rico or xes to show whet	hly, enter me her the elev feet	eters. vation is abo meters meters meters	ve or below th	below the HAG.
the next higher floor (elevation C2.b in 1 E3. Attached garage (top of slab) is E4. Top of platform of machinery and/or eq E5. Zone A0 only: If no flood depth number	the diagrams) of the building is uipment servicing the building is	floor elevated in	☐ feet ☐ feet ☐ feet ☐ secordance	☐ meters ☐ meters ☐ meters	☐ above or ☐ above or ☐ above or	☐ below the HAG. ☐ below the HAG. ☐ below the HAG.
SECTION F -	PROPERTY OWNER (OR OWN	ER'S REPRESI	ENTATIVE) CERTIFIC	CATION	· · · · · · · · · · · · · · · · · · ·
The property owner or owner's authorized re	presentative who completes Section	s A. B. and F for Z	one A (with			nmunity-issued BFE) o
Zone AO must sign here. The statements in Property Owner or Owner's Authorized Repre		the best of my kno	owledge.			
Address		City		State	710.0	- J -
Signature				28,31,233,850	ZIP Co	
Comments		Date	6.	Telepho	one	23
Omnorio	CECTION C. CORMANIANTY	NEODMATION	(ADTION 6		☐ Check	here if attachments.
	SECTION G - COMMUNITY I					
G2. A community official completed Sec G3. The following information (Items G	applicable item(s) and sign below. Che aken from other documentation tha elevation information. (Indicate the tion E for a building located in Zone 4–G9) is provided for community flo	t has been signed t has been signed source and date of A (without a FEMA odplain managem	ent used in d and seale of the eleva A-issued or nent purpos	Items G8–G ad by a licen- ation data in community-i- ses.	10. In Puerto I sed surveyor, the Commen ssued BFE) or	Rico only, enter meters engineer, or architect ts area below.) Zone AO.
4. Permit Number	G5. Date Permit Issued	G6. D	ate Certific	cate Of Com	oliance/Occup	ancy Issued
i7. This permit has been issued for: 8. Elevation of as-built lowest floor (includ 9. BFE or (in Zone AO) depth of flooding a 10. Community's design flood elevation:	ing basement) of the building:		☐ feet ☐	meters		
ocal Official's Name		Title				
ommunity Name		Telephone				
ignature		Date		71-35-31-35-32-32-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-		
omments						
					C 051	horo if ottook
					☐ Check	here if attachments.

Building Street Address (incl	es, copy the corresponding information luding Apt., Unit, Suite, and/or Bldg. No	o.) or P.O. Route and B	ox No.	FOR INSURANCE COMPANY USE Policy Number:		
708 TIMBALIER ST	TREET					
City WAVELAND	State MS			С	ompany NAIC Nu	mber:
	SECTION D – SURVEYOR, ENGIN	EER, OR ARCHITE	CT CERTIFICA	TION (CON	ITINUED)	
Copy both sides of this Eleva	ation Certificate for (1) community offici	ial, (2) insurance ager	t/company, and (3	3) building o	wner.	
CONTACT CITY	INERY SHOWN IN SECTION C-2-E WAS OF WAVELAND BUILDING OFFICIALS	S THE AIR CONDITIO FOR ANY FURTHER	NER UNIT PEDES HEIGHT REQUIRE	TAL. EMENTS.		
Signature /	hills	Date	5/03/2013		JOB# I	P13385
SECTION E - BUILD	ING ELEVATION INFORMATION (SURVEY NOT REQ	UIRED) FOR Z	ONE AO AI	ND ZONE A (WITHOUT BFE)
For Zones AO and A (without For Items E1–E4, use natural	BFE), complete Items E1–E5. If the Cer grade, if available. Check the measure	tificate is intended to ment used. In Puerto	support a LOMA o	or LOMR-F re neters.	quest, complet	e Sections A, B,and
Brade (FIAd) and the lowe	tion for the following and check the app st adjacent grade (LAG).					
b) Top of bottom floor (inc	luding basement, crawlspace, or enclose	sure) is	reamine action and action of	meters		below the HAG.
2. For Building Diagrams 6-0	luding basement, crawlspace, or enclos 9 with permanent flood openings provid	ed in Section A Harris	Li feet	⊔ meters	☐ above or	\square below the LAG.
the next higher floor (eleva	ation C2.b in the diagrams) of the build	ling is				
3. Attached garage (top of sl	ab) is					☐ below the HAG.☐ below the HAG.
	ery and/or equipment servicing the bui					below the HAG.
5. Zone AO only: If no flood of ordinance? ☐ Yes ☐ N	depth_number is available, is the top of	the bottom floor eleva	ated in accordance	e with the co	mmunity's floo	dplain managemen
S	ECTION F – PROPERTY OWNER	(OR OWNER'S RE	PRESENTATIVE) CERTIFI	CATION	
me no must sign here. The	authorized representative who comple statements in Sections A, B, and E are chorized Representative's Name	correct to the best of	my knowledge.	nout a FEMA	I-Issued or com	munity-issued BFE
ddress		City		State	ZIP Co	de
gnature		Date		Telepho	one	
omments	-	5	···			
	OFOTION O CONT				☐ Check	here if attachments
e local official who is authoria	SECTION G - COM					
or and Elevation derandate. C	ted by law or ordinance to administer the complete the applicable item(s) and sign	below. Check the me	asurement used in	Items G8–G	In Puerto R	ico only, enter mete
☐ The information in Sewho is authorized by I.	ction C was taken from other documer aw to certify elevation information. (In	ntation that has been	signed and seale	ed by a licen	sed surveyor, e	engineer, or archite
2. A community official co	ompleted Section E for a building locate tion (Items G4–G9) is provided for com	ed in Zone A (without	a FEMA-issued or	community-i	ssued BFE) or 2	Zone AO.
. Permit Number	G5. Date Permit Issue		G6. Date Certific		pliance/Occupa	ancy Issued
. This permit has been issu		Substantial Improvem	ent	~~~		
. Elevation of as-built lowes	t floor (including basement) of the build	ding:		□meters	Datum	
. BFE or (in Zone A0) depth	of flooding at the building site:			meters	Datum	
O.Community's design flood	elevation:			meters	Datum	
al Official's Name		Title				
mmunity Name		Telephon	е			
nature		Date				
mments						
					☐ Check h	ere if attachments.
A Form 086-0-33 (7/12)						

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

National Flood Insurance Program Important: Read the instructions on pages 1-9.

- Total Troop In Control Troop In	mportant	. Read the instruction	s on pages 1-9.	
THE RESIDENCE AND THE PROPERTY OF THE RESIDENCE PROPERTY OF THE PROPERTY OF TH	SEC	TION A - PROPERTY IN	IFORMATION	For Insurance Company Use:
A1. Building Owner's Name Ju				Policy Number
A2. Building Street Address (in 708 Timbalier Street	cluding Apt., Unit, Suite, and/or	Bldg. No.) or P.O. Route an	d Box No.	Company NAIC Number
City Waveland State	MS ZIP Code 39576			A second process of the second
A3. Property Description (Lot an Hancock County Tax Parcel Nur	nd Block Numbers, Tax Parcel N nber 138K-2-34-020.000	Number, Legal Description,	etc.)	
 A4. Building Use (e.g., Residen A5. Latitude/Longitude: Lat. 30 A6. Attach at least 2 photograph A7. Building Diagram Number 9 A8. For a building with a crawlsh a) Square footage of crawl b) No. of permanent flood enclosure(s) within 1.0 f c) Total net area of flood openir 	16'20.2" Long. 89 23'27.5" Holes of the building if the Certificate 20 cace or enclosure(s): space or enclosure(s) openings in the crawlspace or boot above adjacent grade penings in A8.b	rizontal Datum: NAD 19 le is being used to obtain flo A9. n/a sq ft n/a sq in	od insurance. For a building with an a a) Square footage of a b) No. of permanent flowithin 1.0 foot abov c) Total net area of flood d) Engineered flood op	attached garage <u>n/a</u> sq ft ood openings in the attached garage re adjacent grade <u>n/a</u> ood openings in A9.b <u>n/a</u> sq in penings?
Name of the same	The state of the s	NSURANCE RATE MAI	' (FIRM) INFORMATI	ION
B1. NFIP Community Name & Co City of Waveland 285262		B2. County Name Hancock		B3. State Mississippi
B4. Map/Panel Number B: 28045C0342	5. Suffix B6. FIRM Index D Date October 16, 2009	B7. FIRM Panel Effective/Revised D October 16, 2009		B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 18'
11. Indicate elevation datum use 12. Is the building located in a C Designation Date	oastal Barrier Resources Syster	m (CBRS) area or Otherwise	e Protected Area (OPA)? A	? ☐ Yes ☐ No
I I THE PARTY OF THE PROPERTY OF THE PARTY O	SECTION C - BUILDING E	LEVATION INFORMAT	ON (SURVEY REQU	IRED)
 Elevations – Zones A1-A30, A below according to the building Benchmark Utilized <u>K 190 Re</u> Conversion/Comments 	ill be required when construction E, AH, A (with BFE), VE, V1-V3 g diagram specified in Item A7. setVertical Datum <u>NAVD88</u>	n of the building is complete 0, V (with BFE), AR, AR/A, Use the same datum as the	AR/AF AR/A1-A30 AR/	☐ Finished Construction /AH, AR/AO. Complete Items C2.a-h rement used.
	ling basement, crawlspace, or e	enclosure floor) <u>19.3</u>	☑ feet ☐ meters (Pu	erto Rico only)
b) Top of the next higher floorc) Bottom of the lowest horize	or contal structural member (V Zon	<u>n/a</u> es only) <u>n/a</u> .	☐ feet ☐ meters (Pur	
d) Attached garage (top of s		n/a	☐ feet ☐ meters (Pue	
e) Lowest elevation of mach	nery or equipment servicing the	building <u>n/a</u> .	☐ feet ☐ meters (Pue	
	ent and location in Comments) grade next to building (LAG)	9.5	☐ feet ☐ meters (Pue	orto Pico only)
g) Highest adjacent (finished) grade next to building (HAG)	<u>9.7</u>	☐ feet ☐ meters (Pue	
h) Lowest adjacent grade at structural support	lowest elevation of deck or stair	s, including <u>9.3</u>	☐ feet ☐ meters (Pue	erto Rico only)
	SECTION D - SURVEYOR	, ENGINEER, OR ARCH	ITECT CERTIFICATI	ON
his certification is to be signed an nformation. <i>I certify that the information that any false statemen</i> Check here if comments are pr	nation on this Certificate represent In the properties of the prop	ents my best efforts to interr	ret the data available.Ⅰ . Code, Section 1001.⊠	a a PROPERTY OF PROPERTY OF THE PROPERTY OF TH
Certifier's Name Robert Joseph Kn itle Professional Surveyor	foul In one	License Num esal Engineering Services, In	nber LS-2209	ENGINEER AND ENGINEER AND ENGINEER
ddress 14321 Creosote Road	City Gulfport	State MS	ZIP Code 3950:	3 27 1/2 00 25
ignature A T O		Clate 1415	Zii Oude 3730.	SURVE SURVE
dad all	Date Jul	y 25, 2012 Telephone	228-867-9100	- 03,05 Missings

IMPORTANT: In these spaces, co	opy the c esponding informa	ation from S	Section A.	For Insurance Company Use:
Building Street Address (including Apt.,				Policy Number
708 Timbalier Street. City WavelandState MS ZIP Code 39				Company NAIC Number
•		D ADCLITE	CT CERTIFICATIO)N (CONTINUED)
	D - SURVEYOR, ENGINEER, O			
Copy both sides of this Elevation Certific Comments The lowest machinery or each of the comments of the commen				
Signature SECTION E - BUILDING ELEV For Zones AO and A (without BFE), column and C. For Items E1-E4, use natural generated (HAG) and the lowest adjacent and the lowest adja	MATION INFORMATION (SURVE) Implete Items E1-E5. If the Certificate rade, if available. Check the measure the following and check the appropriate cent grade (LAG). In the following and	Date 07 EY NOT REC e is intended to the inte	OUIRED) FOR ZON O support a LOMA or In Puerto Rico only, e how whether the elevi feet me feet me as 8 and/or 9 (see pa as above or be blow the HAG	ation is above or below the highest adjacent eters □ above or □ below the HAG. eters □ above or □ below the LAG. ges 8-9 of Instructions), the next higher floor below the HAG. i. s □ above or □ below the HAG.
E4. Top of platform of machinery and	or equipment servicing the building number is available, is the top of the	bottom floor e	leet meters	e with the community's floodplain management
ordinance? ☐ Yes ☐ No ☐	Unknown. The local official must c	ertify this info	mation in Section G.	STARLE CANNOT A UNIT OF THE STARLE ST
	F - PROPERTY OWNER (OR O			
or Zone AO must sign here. The stater	nents in Sections A, B, and E are co	ections A, B, a rrect to the be	nd E for Zone A (without of my knowledge.	out a FEMA-issued or community-issued BFE)
Property Owner's or Owner's Authorize	d Representative's Name			
Address		City		State ZIP Code
Signature		Date		Telephone
Comments				
				☐ Check here if attachments
	SECTION G - COMMUNI	TY INFORM	ATION (OPTIONAL	-)
The local official who is authorized by lav and G of this Elevation Certificate. Com	y or ordinance to administer the com	munity's flood	plain management or	dinance can complete Sections A, B, C (or E),
G1. The information in Section C w	as taken from other documentation televation information. (Indicate the s	that has been ource and dat	signed and sealed by e of the elevation data	a licensed surveyor, engineer, or architect who a in the Comments area below.)
G2. A community official completed	d Section E for a building located in 2	Zone A (withou	ut a FEMA-issued or o	community-issued BFE) or Zone AO.
G3. The following information (Item	ns G4-G9) is provided for community	floodplain ma		0.00 II (0.000 In 10.000 I
G4. Permit Number	G5. Date Permit Issued		G6. Date Certificate	e Of Compliance/Occupancy Issued
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (in G9. BFE or (in Zone AO) depth of flood G10. Community's design flood elevation	cluding basement) of the building: ing at the building site:	ubstantial Impi	rovement feet meters (F feet meters (F	PR) Datum
Local Official's Name		Title		
Community Name		Tele	phone	
Signature		Date)	
Comments		5		
				☐ Check here if attachment
				Replaces all previous edition
EEMA Form 81.31 Mar 09				replaces all previous edition

FEMA Form 81-31, Mar 09

	aces, copy the cosponding		NAME OF THE PARTY	For Insurance Company Use:
	ng Apt., Unit, Suite, and/or Bldg. No		THE REAL PROPERTY AND PERSONS ASSESSMENT AND PARTY AND PERSONS ASSESSMENT AND PARTY AN	Policy Number
City WavelandState MS ZIP C	Code 39576			Company NAIC Number
SEC	CTION D - SURVEYOR, ENGIN	EER. OR ARCHITECT CERT	IFICATION (CONT	NUFD)
	n Certificate for (1) community offici		Remarks (Secretary of the Secretary of States of Secretary of	NAME OF THE OWNERS OF TAXABLE PARTY OF TAXABLE PARTY OF THE PARTY OF TAXABLE PARTY.
	ery or equipment serving the buildin		and (b) building owner	
	,			
Sohot Q	In Su 1			
Signature		Date 07/25/2012	The state of the s	
SECTION E - BUILDING	ELEVATION INFORMATION (SURVEY NOT REQUIRED) F	OR ZONE AO ANI	Check here if attachment
	A STATE OF THE STA		PERSONAL PROPERTY OF THE PARTY	AND COMPANY OF THE PARTY OF THE
and C. For Items E1-E4, use na	FE), complete Items E1-E5. If the Catural grade, if available. Check the	ertificate is intended to support a measurement used. In Puerto R	LOMA or LOMR-F red ico only, enter meters.	quest, complete Sections A, B,
E1. Provide elevation informati	ion for the following and check the a			
grade (HAG) and the lower a) Top of bottom floor (incl	st adjacent grade (LAG). uding basement, crawlspace, or end	closure) is	et Ometers Oah	ove or D below the HAC
 b) I op of bottom floor (incl 	uding basement, crawlspace, or end	closure) is	et I meters I abo	ove or D below the LAG
E2. For Building Diagrams 6-9 (elevation C2.b in the diagrams	with permanent flood openings prov rams) of the building is	rided in Section A Items 8 and/or ☐ feet ☐ meters ☐ above	9 (see pages 8-9 of In	structions), the next higher floor
E3. Attached garage (top of sla	ab) is 🔲 feet 🗌	meters above or below	the HAG.	
E4. Top of platform of machine	ery and/or equipment servicing the b	uilding is feet	meters above	or below the HAG.
ordinance? Yes N	depth number is available, is the top No Unknown. The local official	must certify this information in Se	cordance with the cor ection G.	nmunity's floodplain management
	TION F - PROPERTY OWNER			ATION
The property owner or owner's au	uthorized representative who comple	etes Sections A, B, and E for Zon	e A (without a FEMA-i	CHICAGO IN THE STREET,
or Zone AO must sign here. The	statements in Sections A, B, and E	are correct to the best of my know	wledge.	
Property Owner's or Owner's Aut	norized Representative's Name			
Address		City	State	ZIP Code
Signature		Date	Telephone	
Comments				
				☐ Check here if attachmen
The state of the s		JUNITY INFORMATION (OP		
nd G of this Elevation Certificate.	by law or ordinance to administer th Complete the applicable item(s) and	d sign below. Check the measure	ement used in Items G	8 and G9.
is authorized by law to ce	n C was taken from other document ertify elevation information. (Indicate	the source and date of the eleva	tion data in the Comm	nents area below.)
	pleted Section E for a building locate			ued BFE) or Zone AO.
	(Items G4-G9) is provided for comr	nunity floodplain management pu	rposes.	
G4. Permit Number	G5. Date Permit Issued	G6. Date Co	ertificate Of Complian	ce/Occupancy Issued
7. This permit has been issued for	or: New Construction	☐ Substantial Improvement		
8. Elevation of as-built lowest floo	or (including basement) of the buildi	7 ACTION OF THE PROPERTY OF TH	eters (PR) Datum	
9. BFE or (in Zone AO) depth of	flooding at the building site:		neters (PR) Datum	
Community's design flood elev	vation	feet m	eters (PR) Datum	
ocal Official's Name		Title		2
Community Name		Telephone		
Signature		Date		
Comments				
				Check here if attachment

2013 6125
Recorded in the Above
Deed Book & Page
05-29-2013 10:18:55 AM,
Timothy A Kellar
Hancock County

WAVELAND

NONCONVERSION AGREEMENT with CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 29 day of by Magnife Magnife Witnesseth: WITNESSETH: WHEREAS, the Owner is the record owner of a 708 Timbalier In the designated in the Tax Records as WHEREAS, the Owner has applied for a permit enclosed area below the base flood elevation conditions and under Permit Number 16519 WHEREAS, the Owner agrees to record this DE following covenants, conditions and restrictions agranting the Permit, and affects rights and obligations.	"Owner" ("Owner" clip of Waveland, to place a structur onstructed in accoraveland Floodplain clip claration and are placed on the a	Ms. in the County of e on that properly the dance with the requir Management Ordina certifies and declares affected property as a	Hancock, of has an rements of ance of Number that the a condition of	
his heirs, personal representatives, successors,				
UPON THE TERMS AND SUBJECT TO THE CO	ONDITIONS, as fol	lows:		
1. The structure or part thereof to which these co	nditions apply is;			
2. At this site, the Base Flood Elevation is AE Vertical Datum.	18 feel above me	ean sea level, Nation	al Geodetic	
3. Enclosed areas below the Base Flood Elevatio storage, or access to the building. All Interior walls Elevation shall be unfinished or constructed of flo plumbing devices shall not be installed below the	s, cellings and floc od resistant mater	rs below the Base F ials. Mechanical, ele	lood	
4. The walls of the enclosed areas below the Base equipped with openings as shown on the Permil.	e Flood Elevation	shall be equipped an	nd remain	
5. The jurisdiction issuing the Permit and entorcing action to correct any violation. Any alterations or estructure uninsurable or increase the cost for floor	hanges from these	ay take any appropr e conditions also ma	iate legal y render the	
6. A duly appointed representative of the City is au inspecting the exterior and interior of the enclosed Such inspections will be conducted upon due notice each year. More frequent inspections may be conducted the Permit.	area to verify con se to the Owner ar	npliance with this De nd no more frequentl	claration. y than once	
7. Other conditions:			a	hent Wrother
In witness whereof the undersigned set their hands	s and seals this	day of Mo	14,20/3	SIN' BRENT THOO
Transta / Wast	VAINS	Stock	000	ANOTARY PUBLIC
Owner (Seal)	Tiene	Steak (Seal)	My Commercial County Policy Co
			1	-21-14

2013 6126 Deed Book & Page

WAVELAND

FLOODPLAIN VENTING AFFIDAVIT City of Waveland

I hereby acknowledge that City	OF WAVELIND
is issuing an Occupancy Certificate for the property known as:	
708 Timbelier St. W	aveland ms 39576
under Permit #	
•	•
in which required Floodplain Management Ordinance requirements have been met and a final inspection performed. At the time of inspection, vents and craw space access doors used to meet the flood venting requirements of the Ordinance would allow the automatic entry and exit of floodwaters. I acknowledge that all opening designed to meet this requirement must be maintained as flood vents, and that the elimination or alteration of the openings in any way that would no longer allow the automatic entry and exit of flood waters would violate the Flood Damage Prevention. Ordinance. Violations may incur civil penalties and possible court action. In addition, I acknowledge that alteration of the vents could result in greater risk to my property and personal safety in the event of a flood. Flood insurance claims may be denied, and flood insurance may not be available or flood Insurance premiums increase if vents are altered.	
As witness the hand and seal of the owner of the subject property this	
29 day of May	2013_
¥ .	
Jane Stock	Janita L. Menahan
WITNESS	OWNER (please print)
KLIN WOOD TO WOOD TO THE WOOD	Just L. Mendan
NOTARY PUBLIC ID No. 95074	OWNER'S SIGNATURE
Jan 21. 2014 Jan 21. 2014 Jan 21. 2014 Jan 21. 2014	-
1-21-14	